

Chairman Mendenhall and members of the Committee. I am Robert E. Wynia M.D. My emphasis is to provide background information.

My background is as follows: It was my pleasure to serve as a member of the Organized Medical Staff Section (OMSS) of the American Medical Association (AMA) and as the Montana Section Chair from 1998 until 2005. During my 42 years of Internal Medicine practice in Great Falls, I served on all Medical Staff Committees as a member or as chairman. I served as Department Chair on several occasions as well as Chief of Staff. Because of this I spent 23 years on the Medical Staff Executive Committee and was an active staff member of all three Great Falls hospitals.

In order for Legislators as well as the public to understand the function of Medical Staffs, it is important to outline the important functions, which the medical staff performs. Basically the medical staff provides services not only for themselves, but also more importantly for the general public (as advocates for patients) as well as the hospital. It should be noted that the medical staff is a separate and distinct entity.

In accordance with the Joint Commission on Hospital Accreditation, the medical staff must be functional in terms of Credentialing all physicians, both new applicants as well as re-certifying all current staff physicians at regular intervals to be certain that their qualifications, licenses, liability insurance, continuing education and other quality issues meet standards of the JCAHO, as well as those established by the staff itself. This process is for the protection of patients, hospital and evaluating physicians.

This function is accomplished by standing committees of the Medical Staff and include--

- Credentialing Committee,
- By-laws committee,
- Medical Records Committee,
- Utilization Review Committee,
- Critical Care Committee,
- Continuing Education Committee,
- Infection Control Committee,
- Trauma Committee,
- Intensive Care Committee,
- Oncology Committee,
- Pharmacy and Therapeutics Committee,
- Medical Education Library Committee,
- Medical Care Evaluation Committee.
- In addition as the need arises, special committees are appointed by the Medical Staff to review and evaluate special problems.

These committees are anticipated to be a part of the medical staff functions by the JCAHO in order to help provide accreditation for the hospital. If these functions of the medical staff are not adequately carried out it can adversely impact the hospitals JCAHO accreditation.

Therefore, a vital active medical staff is necessary for the ultimate function and quality of the hospital and to insure patient access and quality care.

My intention in providing this information is to impress you with the fact that it is imperative for physicians to be members of a Hospital Medical Staff. Without this privilege, physicians cannot effectively practice their profession and they cannot effectively advocate for patients and be certain that the patients in turn receive the best possible medical care in a given region.

Credentialing of physicians is based on their training, expertise in given fields, ethics, abiding by medical staff by-laws, state licensure, liability insurance, and continuing medical education, not to mention review of their patient care and respect for the facility in which they practice.

Economic credentialing comes in many and various forms, which commonly do not relate to the items, mentioned in the previous paragraph, but rather focus on economic issues whether real or perceived by the Hospital Administration or its Board. These economic issues may be as insignificant as the number of admissions or procedures accomplished in a given time frame, or may relate to larger issues of investment in what is perceived to be competitive to the Hospital.

Regardless of the issue, loss of staff privileges is a devastating problem for any physician and loss of effective staff members can seriously interfere with the function of the Medical Staff in monitoring patient access to healthcare, the ability to advocate for patients and the ability of the Hospital to gain JCAHO accreditation.

When effective new expensive Clinical Services or Technology, which provide important advances in providing improved patient care develop, physicians commonly approach the Hospital Administration and/or Board seeking addition of these services. Generally the costs are significant. If the hospital and/or board elect not to become involved, an attempt will be made to form a joint venture with the hospital. If this is not possible, physicians will risk their own finances to develop what they feel is an important addition for the Medical community. The physicians should not be penalized by loss of staff privileges, but they in turn should recognize and admit their conflict of interest.

I stand in support of this SB 312 as amended in order to achieve some form of regulation of Economic Credentialing, however the amendments do weaken the ultimate impact of what is needed, it is a start and provides us the opportunity to express our concerns about the issue.